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In the Claims:

Claim 1 (CURRENTLY AMENDED): A method of diagnosing a probability of pain relief through medical treatment in a patient, the method comprising the following steps:

- (a) administering a perceptual test to the patient, the perceptual test including a plurality of declarative statements relating to somatization;
- (b) receiving responses from the patient to the plurality of declarative statements, said responses including an affirmative response and a negative response;
- (c) recording the responses to said plurality of declarative statements on a response sheet;
- (c d) providing three scoring templates of pre-selected responses to the plurality of declarative statements, the three scoring templates of pre-selected responses being selected from a group of validity factors comprising defensiveness, predictiveness and carelessness;
- (d e) providing six scoring templates of pre-selected responses to the plurality of declarative statements, the six scoring templates of pre-selected responses being selected from a group of clinical factors comprising somatic concern, depressed mode, passive personality, compulsive/obsessive personality, hypomania, and ego integrative defect;
- (e f) applying each of said scoring templates from the group of validity factors and the group of clinical factors to the responses to the plurality of declarative statements from the patient, producing a raw score value for each of the validity factors and each of the clinical factors;

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- (g) recording the raw score value for each of the validity factors and each of the clinical factors on the response sheet;
- (f h) assessing errors in the test utilizing a carelessness factor raw score;
- (g i) adjusting each raw score from the group of clinical factors comprising somatic concern, compulsive/obsessive personality, and hypomania, by a percentage of a defensiveness factor raw score, producing adjustment scores for each raw score from said group of clinical factors;
- (j) recording the adjustment scores for each raw score from said group of clinical factors on the response sheet;
- (h k) creating a set of final scores relating to the somatic concern clinical factor, the compulsive/obsessive personality clinical factor, and the hypomania clinical factor;
- (l) recording said set of final scores on the response sheet;
- (i m) preserving a set of raw scores from a group of clinical factors comprising depressed mode, passive personality, and ego integrative defect;
- (j n) standardizing a score for each of the somatic concern clinical factor final score, the depressed mode clinical factor raw score, the passive personality clinical factor raw score, the compulsive/obsessive personality clinical factor final score, and the hypomania clinical factor final score, utilizing a standardizing analysis of a clinically assessed normative group;
- (k o) applying a set of scoring rules to a group of clinical factor standardized scores comprising somatic concern, depressed mode, and passive personality;

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- (t p) determining a scoring value of standard deviations above a normative group mean for each said standardized score clinical factor;
- (m q) applying the set of scoring rules to the ego integrative defect clinical factor raw score, determining a scoring value of standard deviations above the normative group mean for the ego integrative defect clinical factor;
- (n r) applying the set of scoring rules to a numerical relationship between the scoring value for the somatic concern clinical factor and the scoring value for the compulsive/obsessive personality clinical factor;
- (o s) determining a scoring value of standard deviations above the normative group mean for said numerical relationship;
- (p t) applying the set of scoring rules to a numerical relationship between the scoring value for the somatic concern clinical factor and the scoring value for the passive personality clinical factor;
- (q u) determining a scoring value of standard deviations above the normative group mean for said numerical relationship;
- (r v) applying the set of scoring rules to a numerical relationship between the scoring value for the depressed mode clinical factor and the scoring value for the hypomania clinical factor;
- (s w) determining a scoring value of standard deviations above the normative group mean for said numerical relationship;
- (x) recording the scoring value for the somatic concern clinical factor, the scoring value for

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the depressed mode clinical factor, the scoring value for the passive personality clinical factor, the scoring value for the ego integrative defect clinical factor, the scoring value for the numerical relationship between the somatic concern clinical factor and the compulsive/obsessive personality clinical factor, the scoring value for the numerical relationship between the somatic concern clinical factor and the passive personality clinical factor, and the scoring value for the numerical relationship between of the depressed mode clinical factor and the hypomania clinical factor on the response sheet;

- (t y) summing the scoring value for the somatic concern clinical factor, the scoring value for the depressed mode clinical factor, the scoring value for the passive personality clinical factor, the scoring value for the ego integrative defect clinical factor, the scoring value for the numerical relationship between the somatic concern clinical factor and the compulsive/obsessive personality clinical factor, the scoring value for the numerical relationship between the somatic concern clinical factor and the passive personality clinical factor, and the scoring value for the numerical relationship between of the depressed mode clinical factor and the hypomania clinical factor; and
- (u z) thereby producing a single pain index score indicating and measuring the effect of somatization on the patient.

Claim 2 (CURRENTLY AMENDED): A method as in claim 1 and further including the steps of:

- (a) establishing a probability equation score for the probability of pain relief through medical treatment by comparing the predictiveness factor raw score to a regression analysis of predictiveness validity factor raw scores to predict percentages of probability

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of success to medical treatment;

- (b) plotting the probability equation score and the pain index score to a graph of divergent linear curves of clinically observed percentage probability values and numerical indices scores for multiple patients; ~~and~~
- (c) ~~thereby~~ comparing a relationship between the probability equation score and the pain index score, confirming accuracy and internal validity of the method diagnosing a probability of pain relief through medical treatment in a the patient: ; and
- (d) thereby producing an outcome analysis graph diagnosing the probability of pain relief through medical treatment in the patient.